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09/18/2006

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(Depositor's name) (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/500.571	09/15/2004	Fumie Kawai	120268	5245

TITLE OF INVENTION: A PROJECTOR FOR COMPENSATING CHROMATIC ABBERATION OF MAGNIFICATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/18/2006		
EXAMINER		ART UNIT	CLASS-SUBCLASS]				
KOVAL, MELISSA J		2851	353-020000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
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a Applicant clair	atus (from status indicate ms SMALL ENTITY stat and Publication Fee (if red	tus. See 37 CFR 1.27.		nger claiming SMALL EN the applicant; a registered				
Authorized Signatur	to to	ates Patent and Trademan	k Office.	Date November				
Typed or printed nar	me Timothy S.	Smith	Registration No. <u>58,355</u>					

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